

## PART B - ISSUE FEE (S) TRANSMITTAL

Complete and mail this form, together with applicable fees, to:

**Box ISSUE FEE**  
**Assistant Commissioner for Patents**  
**Washington, D.C. 20231**

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, (a) specifying a new correspondence address; and/or (b) indicating a separate FEE ADDRESS for maintenance notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

REED SMITH LLP  
 SUITE 1400  
 3110 FAIRVIEW PARK DRIVE  
 FALLS CHURCH, VA 22042

SEP 11 2007  
 PATENT & TRADEMARK OFFICE  
 IAP42

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate.

Certificate of Mailing

I hereby certify that this Issue Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/615,795	7/10/2003	Yukiko Takeda	NITT.0146	3512

**TITLE OF INVENTION: MOBILE TERMINAL EQUIPMENT AND PACKET COMMUNICATION METHOD BETWEEN TERMINALS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	10/11/2007

EXAMINER	ART UNIT	CLASS - SUBCLASS
VU, MICHAEL T	2617	370-338000

1. Change of correspondence address or indication of "Fee Address" (37 CFR §1.363). Use of PTO forms and Customer Number are recommended, but not required.  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.
2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (have as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed
1. Reed Smith LLP  
 2. Stanley P. Fisher, Esq.  
 3. Juan Carlos A. Marquez, Esq.
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

Hitachi, Ltd.

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo, Japan

Please check the appropriate assignee category (will not be printed on the patent)  individual  Corporation or private group entity  government

4a. The following fees are enclosed:

- Issue fee  
 Publication Fee  
 Advance Order - # of Copies: 3

## 4b. Payment of Fee(s):

- A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-1480 (enclose an extra copy of this form).

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) to the application identified above.

(Authorized Signature)

(Post) September 11, 2007

Stanley P. Fisher Reg. No. 24,344  
 Juan C.A. Marquez Reg. No. 34,074  
 NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered patent attorney or agent, or the assignee, or other party in interest as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, United States Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev.07-01) Approved for use through 01/31/2004. OMB 0651-0033

TRANSMIT THIS FORM WITH FEE(S)  
 Page 2 of 3

09/12/2007 JAD002 00000030 10615795

01 FC:1501	1400.00	OP
02 FC:1504	300.00	OP
03 FC:8801	9.00	OP

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE